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TOBACCO AND SNUFF.

THEIR USE BY WHITE SCHOOL CHILDREN IN THE CITY OF X.

By C. W. STILES, Professor of Zoology, and D. N. RICHARDS, M. D., Assistant, United States Public Health Service.

During a study of the white school children in the city of X, every child was asked whether he (or she) dipped snuff or chewed or smoked tobacco. Answers were obtained for 2,215 pupils (1,043 boys, 1,172 girls) ranging in age from 4.75 years to 19.75 years, inclusive. In many instances the answers were given by the parents and in nearly all cases the parents were aware of the answers given by the children. The figures obtained practically represent, therefore, the children who use snuff or tobacco with the knowledge or consent of the parents, but probably do not include clandestine smokers.

All tabulations of results were classified: First, by boys and girls; second, by quarter-year age of the children, and third, by the sanitary condition of the home as represented by sewer connection (group S), or by the presence of a privy (group P). Group U contains children from homes with unknown sanitation.

The following table gives a general summary of the results obtained:

	Admit—						Deny-		
	Chewing.		Dipping.		Smoking.		Namehan	D	Total number.
	No.	Per cent.	No.	Per cent.	No.	Per cent.	Number.	Per cent.	
BOYS.									
Group S	11 5 2	1. 42 2. 91 2. 08	 1	1.04	50 9 13	6. 46 5. 23 13. 54	717 159 80	92. 52 92. 44 83. 33	775 172 96
Total	18	1.73	1	.10	72	6.90	956	91.66	1,043
GIRLS.									
Group P			5 1	.58			857 234 75	99. 42 99. 57 100. 00	862 235 75
Total			6	. 51			1,166	99.49	1,172
Grand total	18	. 81	7	.32	72	3. 25	2,122	95.80	2,215

Boys.

Of 1,043 boys, 956 (namely, 91.66 per cent) denied chewing, dipping, or smoking, and 87 (namely 8.34 per cent) admitted one or more of these habits.

Eighteen boys (1.73 per cent) admitted chewing; 1 boy (0.096 per cent) admitted snuff dipping; 72 boys (6.9 per cent) admitted smoking.

Dividing the boys according to the sanitation of their homes, it is seen that in the less refined homes (provided with privies) prac-

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tically twice as many boys (2.91 per cent) chew as in homes connected with sewers where 1.42 per cent chew.

The percentage of smokers was slightly higher (namely, 6.46 per cent) in the more refined homes than (5.23 per cent) among the boys from the less refined homes.

Among 96 boys for whose homes we obtained no datum regarding sanitation, 2.08 per cent chew, 1.04 per cent dip snuff, and 13.54 per cent smoke.

Girls.

Of 1,172 girls, 1,166 (namely, 99.49 per cent) deny chewing, dipping, or smoking. All girls (100 per cent) deny chewing or smoking; 6 girls (0.51 per cent) admit dipping.

Dividing the girls according to the sanitation of their homes, the striking conclusion is reached that a slightly greater percentage (namely, 0.58 per cent) of the girls from the more refined homes dip snuff than there are snuff dippers (0.43 per cent) among the girls from the less refined homes. This difference is, however, so slight that it might easily be accounted for by the recent very marked improvement in the sanitation of the city; therefore the difference is not to be taken into serious consideration.

Ages of Users.

The youngest tobacco chewer we found is 8 years old. The chewers are: 8 years old, 1 boy; 9 years, 3 boys; 10 years, 2 boys; 11 years, 3 boys; 12 years, 2 boys; 13 years, 2 boys; 14 years, 3 boys; 18 years, 1 boy; 19 years, 1 boy. That not one chewer is found among 124 boys from 15 to 17 years of age is a little difficult to believe.

The youngest dipper is 9 years old. The dippers are: 9 years old, 1 boy, 1 girl; 11 years, 1 girl; 12 years, 1 girl; 14 years, 2 girls; 15 years, 1 girl.

The youngest smoker is 6 years old. The smokers are: 6 years, 1 boy; 8 years, 1 boy; 9 years, 3 boys; 10 years, 6 boys; 11 years, 8 boys; 12 years, 6 boys; 13 years, 13 boys; 14 years, 8 boys; 15 years, 12 boys; 16 years, 6 boys; 17 years, 4 boys; 18 years, 3 boys; 19 years, 1 boy.

In the foregoing list of ages, the actual numbers, not the percentages, are given.

Age at which children begin the use of tobacco or snuff.

In a number of cases it was possible to obtain a definite statement as to the age at which these habits were begun.

Chewing.—One boy began to chew at 8 years of age, 1 at 10, and 2 at 12.

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Smoking.—One boy began to smoke at 3 years of age, 2 at 6, 2 at 7, 6 at 8, 8 at 9, 4 at 10, 4 at 11, 4 at 12, 2 at 13, 1 at 14, 1 at 17.

Dipping.—Two girls began to dip at 3 years of age, 1 at 4, 1 at 9, and 1 at 12. One of the children who began dipping at 3 years of age did so upon the advice of the family physician in order to "preserve her health." Similar cases are not very rare in the rural districts, and this girl came from the country.

Conclusion.

In the city of X, less than 1 per cent of the 2,215 white school children admit chewing tobacco and less than 1 per cent admit dipping snuff, while 3.25 per cent admit smoking. In all, 4.2 per cent admit the use of tobacco (chewing or smoking) or of snuff. Smoking and chewing were admitted only by boys, while more girls than boys admitted dipping snuff.

The use of tobacco was found to be more common among children from homes with inferior sanitation (privies) than among those from homes with better sanitation (sewer connection).

INDUSTRIAL HYGIENE.

A PLAN FOR EDUCATION IN THE AVOIDANCE OF OCCUPATIONAL DISEASES AND INJURIES.¹

By J. W. SCHERESCHEWSKY, Surgeon, United States Public Health Service.

It must be confessed that this subject is one to be approached in a spirit of diffidence for the reason that the results to be effected are so far-reaching and of such fundamental importance, the methods employed play such a leading part in the final result, and finally, the inauguration of any thorough plan of education will cost so much money, that the writer may well be excused for a tentative spirit in making suggestions.

There would hardly seem need for an extended discussion of the necessity for education in industrial hygiene and the avoidance of occupational complaints. There are approximately from 25,000,000 to 30,000,000 industrial workers in this country, all of whom are more or less exposed to health hazards. While many of these are the ordinary health hazards, present in the industrial as in any other sphere, on the other hand many of them are inherent to the occupation in question. There can be no question that the steady operation of these hazards exerts a deleterious influence upon the health of the individual, while many of them seriously menace life or curtail the period of productive activity.

¹Read before the Section on Industrial Hygiene, American Public Health Association, Rochester, N. Y. September 7, 1915.